

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AL</i>	<i>2292</i>	<i>3/20/00</i>
O.I.P.E. CLASSIFIER		<i>48</i>	<i>3/24/00</i>
FORMALITY REVIEW		<i>64916</i>	<i>5/5/00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ \_\_\_\_\_ Rejected      N \_\_\_\_\_ Non-elected  
 • \_\_\_\_\_ Allowed      I \_\_\_\_\_ Interference  
 - (Through numeral) \_\_\_\_\_ Canceled      A \_\_\_\_\_ Appeal  
 + \_\_\_\_\_ Restricted      O \_\_\_\_\_ Objected

Claim	Date
1	1/12/00
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If more than 150 claims or 10 actions  
 staple additional sheet here

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